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PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Serial No. 10/733,905

Filed: 12/11/2003

Inventor(s): Oscar Romero

Group Art Unit: 3752

Examiner:

For: **TWO-HANDLE FLOW-THROUGH VALVE**

Attorney Docket: 6736-000015


Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

STATUS LETTER

Sir:

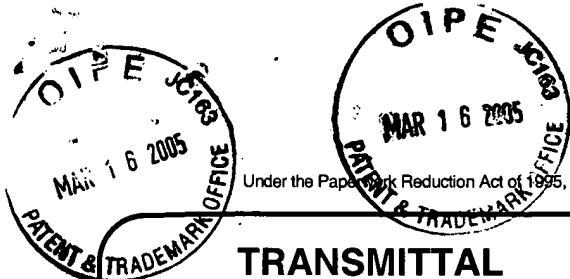
Please advise when the initial Office Action can be expected in the above case.

Respectfully submitted,

By: 
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March 16, 2005



PTO/SB/21 (04-04)

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**TRANSMITTAL
FORM**

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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/733,905
	Filing Date	12/11/2003
	First Named Inventor	Oscar Romero
	Art Unit	3752
	Examiner Name	
Total Number of Pages in This Submission	Attorney Docket Number	6736-000015

ENCLOSURES (check all that apply)

<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Technology Center (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input checked="" type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Postcard.
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Remarks

The Commissioner is hereby authorized to charge any additional fees that may be required under 37 CFR 1.16 or 1.17 to Deposit Account No. 02-2550. A duplicate copy of this sheet is enclosed.

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Harness, Dickey & Pierce, P.L.C.	Attorney Name Christopher M. Brock	Reg. No. 27313
Signature			
Date	March 16, 2005		

CERTIFICATE OF TRANSMISSION/MAILING

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Signature		Date	March 16, 2005

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